

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DIST. OF PENNSYLVANIA

Case number (if known): _____ Chapter you are filing under:

- ☐ Chapter 7
☐ Chapter 11
☐ Chapter 12
☒ Chapter 13

☐ Check if this is an
amended filing

Official Form 101**Voluntary Petition for Individuals Filing for Bankruptcy****02/20**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jodi First Name L. Middle Name Auker Last Name Suffix (Sr., Jr., II, III)	 First Name Middle Name Last Name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names.	Jodi First Name L. Middle Name Sturek Last Name	 First Name Middle Name Last Name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 4 1 4 0 OR 9xx - xx -	xxx - xx - OR 9xx - xx -

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:☐ I have not used any business names or EINs.**Nittany Sleep, LLC**

Business name

Furniture Solutions Outlet, LLC

Business name

Business name

2 0 - 3 1 8 7 0 5 7

EIN

4 6 - 1 6 7 3 4 4 6

EIN

5. Where you live**145 Summit Drive**

Number Street

Centre Hall

City

PA

State

16828

ZIP Code

Centre

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy*Check one:*☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)**About Debtor 2 (Spouse Only in a Joint Case):**☐ I have not used any business names or EINs.

Business name

Business name

Business name

EIN

EIN

If Debtor 2 lives at a different address:

Number Street

City

State

ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

Check one:☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)**Part 2: Tell the Court About Your Bankruptcy Case****7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7☐ Chapter 11☐ Chapter 12☒ Chapter 13

8. How you will pay the fee

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

- ☐ No
- ☒ Yes.

District **Middle District of PA** When **05/05/2015** Case number **4-15-01927**
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No
- ☐ Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

11. Do you rent your residence?

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**

- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

Number _____ Street _____

City _____

State _____

ZIP Code _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
- ☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
- ☐ Yes. Go to line 17.
- 16c.** State the type of debts you owe that are not consumer or business debts.
-
- 17. Are you filing under Chapter 7?**
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**
- ☒ No. I am not filing under Chapter 7. Go to line 18.
- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
- ☐ Yes
- 18. How many creditors do you estimate that you owe?**
- | | | |
|---|--|--|
| <input type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input checked="" type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
- 19. How much do you estimate your assets to be worth?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
- 20. How much do you estimate your liabilities to be?**
- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X



Jodi L. Auker, Debtor 1

Executed on 03/05/2020
MM / DD / YYYY

X

Signature of Debtor 2

Executed on _____
MM / DD / YYYY

Debtor 1 **Jodi L. Aufer**

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

Signature of Attorney for Debtor

Date

3/5/2020
MM/DD/YYYY

Tracy L. Updike

Printed name

Mette Evans and Woodside

Firm Name

3401 North Front Street

Number Street

Harrisburg

City

PA

State

17110

ZIP Code

Contact phone **(717) 232-5000**

Email address **tlupdike@mette.com**

88680

Bar number

PA

State

Certificate Number: 15725-PAM-CC-034145927



15725-PAM-CC-034145927

CERTIFICATE OF COUNSELING

I CERTIFY that on February 26, 2020, at 5:37 o'clock PM EST, Jodi Auken received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Middle District of Pennsylvania, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 26, 2020 By: /s/Kasway Zongwe

Name: Kasway Zongwe

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Fill in this information to identify your case and this filing:

Debtor 1	Jodi	L.	Auker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

<p>1.1.</p> <p>145 Summit Drive</p> <p>Street address, if available, or other description</p> <hr/> <p>Centre Hall PA 16828</p> <p>City State ZIP Code</p> <hr/> <p>Centre</p> <p>County</p> <hr/> <p>Residence at 145 Summit Drive, Centre Hall, PA 16828</p>	<p>What is the property? Check all that apply.</p> <p><input checked="" type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building <input type="checkbox"/> Condominium or cooperative <input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____</p> <p>Who has an interest in the property? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another</p> <p>Other information you wish to add about this item, such as local property identification number: _____</p>	<p>Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i>.</p> <table border="0"> <tr> <td>Current value of the entire property?</td> <td>Current value of the portion you own?</td> </tr> <tr> <td>\$382,500.00</td> <td>\$382,500.00</td> </tr> </table> <p>Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.</p> <p>Fee Simple T/E</p> <hr/> <p><input type="checkbox"/> Check if this is community property (see instructions)</p>	Current value of the entire property?	Current value of the portion you own?	\$382,500.00	\$382,500.00
Current value of the entire property?	Current value of the portion you own?					
\$382,500.00	\$382,500.00					

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → **\$382,500.00**

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
☐ Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....**\$0.00****Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

Household goods and furnishings including but not limited to 2 queen beds, 4 night stands, 3 dressers, 3 mirrors, 2 chests, 2 armoires, sofa table, king bed, bookshelf, sectional, cocktail table, chair, recliner, 2 end tables, 2 shelves, sofa table, counter table with 4 stools, 2 shelves, sofa, end table, 2 recliners, counter table with 4 stools, desk, 2 bookshelves, 2 hutches, 2 credenzas, TV stand, end table, etagere, 9 chairs, dining table, metal table, hutch, credenza, and other small miscellaneous household goods and home decor items

\$10,000.00**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

Electronics including a TV, DVD player and other small electronic items

\$2,000.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

Pool table and game table

\$500.00

Debtor 1 **Jodi L. Aufer**

Case number (if known) _____

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....**Clothing****\$300.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....**Jewelry including mother's diamond ring and costume jewelry****\$2,000.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.....**cat (\$10), dog (\$10), approx. 30 yr old rescue horse (\$0), 15 yr old gelded horse (\$500)****\$520.00****14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....****\$15,320.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes..... Cash:**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes.....

Institution name:

17.1. Checking account:

Checking account with Customer's Bank Mobile**\$1.93**

17.2. Savings account:

Savings account with Customer's Bank Mobile**\$0.81**

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☐ No
☒ Yes. Give specific information about them..... Name of entity: % of ownership:

100% interest in Nittany Sleep, LLC (not operating since 2012) and 100% interest in Furniture Solutions Outlet (not operating since 2015) **100%** **\$0.00**

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No
☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes..... Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

Debtor 1 Jodi L. Aufer Case number (if known) _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....



\$2.74

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe..

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No

☐ Yes. Describe..

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe..

41. Inventory

☒ No

☐ Yes. Describe..

42. Interests in partnerships or joint ventures

☒ No

☐ Yes. Describe..... Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe....

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes....

48. Crops—either growing or harvested

- ☒ No
☐ Yes. Give specific
information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes....

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes....

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....	→	\$382,500.00
56. Part 2: Total vehicles, line 5	<u>\$0.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$15,320.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$2.74</u>	
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>+\$0.00</u>	
62. Total personal property. Add lines 56 through 61.....	\$15,322.74	Copy personal property total → <u>+\$15,322.74</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		\$397,822.74

Fill in this information to identify your case:

Debtor 1	Jodi	L.	Auker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DIST. OF PENNSYLVANIA		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: Residence at 145 Summit Drive, Centre Hall, PA 16828	\$382,500.00	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
Line from <i>Schedule A/B</i> : 1.1			

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Part 2: Additional PageBrief description of the property and line on
Schedule A/B that lists this propertyCurrent value of
the portion you
ownCopy the value from
*Schedule A/B*Amount of the
exemption you claimCheck only one box for
each exemption

Specific laws that allow exemption

Brief description:

Household goods and furnishings including but not limited to 2 queen beds, 4 night stands, 3 dressers, 3 mirrors, 2 chests, 2 armoires, sofa table, king bed, bookshelf, sectional, cocktail table, chair, recliner, 2 end tables, 2 shelves, sofa, counter table with 4 stools, 2 shelves, sofa, end table, 2 recliners, counter table with 4 stools, desk, 2 bookshelves, 2 hutches, 2 credenzas, TV stand, end table, etagere, 9 chairs, dining table, metal table, hutch, credenza, and other small miscellaneous household goods and home decor items

Line from *Schedule A/B*: 6\$10,000.00\$10,000.00**11 U.S.C. § 522(d)(3)**

100% of fair market value, up to any applicable statutory limit

Brief description:

Electronics including a TV, DVD player and other small electronic items

Line from *Schedule A/B*: 7\$2,000.00\$2,000.00**11 U.S.C. § 522(d)(3)**

100% of fair market value, up to any applicable statutory limit

Brief description:

Pool table and game table

Line from *Schedule A/B*: 9\$500.00\$500.00**11 U.S.C. § 522(d)(3)**

100% of fair market value, up to any applicable statutory limit

Brief description:

Clothing

Line from *Schedule A/B*: 11\$300.00\$300.00**11 U.S.C. § 522(d)(3)**

100% of fair market value, up to any applicable statutory limit

Brief description:

Jewelry including mother's diamond ring and costume jewelry (1st exemption claimed for this asset)

Line from *Schedule A/B*: 12\$2,000.00\$1,700.00**11 U.S.C. § 522(d)(4)**

100% of fair market value, up to any applicable statutory limit

Brief description:

Jewelry including mother's diamond ring and costume jewelry (2nd exemption claimed for this asset)

Line from *Schedule A/B*: 12\$2,000.00\$300.00**11 U.S.C. § 522(d)(5)**

100% of fair market value, up to any applicable statutory limit

Brief description:

cat (\$10), dog (\$10), approx. 30 yr old rescue horse (\$0), 15 yr old gelded horse (\$500)

Line from *Schedule A/B*: 13\$520.00\$520.00**11 U.S.C. § 522(d)(3)**

100% of fair market value, up to any applicable statutory limit

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption</small>	Specific laws that allow exemption
Brief description: Checking account with Customer's Bank Mobile Line from <i>Schedule A/B</i> : <u>17.1</u>	<u>\$1.93</u>	<input checked="" type="checkbox"/> <u>\$1.93</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Savings account with Customer's Bank Mobile Line from <i>Schedule A/B</i> : <u>17.2</u>	<u>\$0.81</u>	<input checked="" type="checkbox"/> <u>\$0.81</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

Fill in this information to identify your case:

Debtor 1	Jodi	L.	Auker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim
Do not deduct the value of collateral

Column B
Value of collateral
that supports this claim

Column C
Unsecured portion
If any

2.1	Describe the property that secures the claim:	\$388,304.90	\$382,500.00	\$5,804.90
Shellpoint Mortgage Servicing Creditor's name for The Bank of New York Mellon Number Street PO Box 10826				
Greenville SC 29603-0826 City State ZIP Code				
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Date debt was incurred <u>12/29/2006</u> Last 4 digits of account number <u>2 8 5 3</u>				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$388,304.90

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

*Column A***Amount of claim**
Do not deduct the
value of collateral*Column B***Value of collateral**
that supports this
claim*Column C***Unsecured
portion**
If any**2.2**Describe the property that
secures the claim:**\$131,976.92****\$382,500.00****\$131,976.92****Specialized Loan Servicing LLC**

Creditor's name

for The Bank of New York Mellon

Number Street

8742 Lucent Blvd, Suite 300**Residence at 145 Summit
Drive, Centre Hall, PA 168****Highlands Ranch CO 80129**

City State ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim relates
to a community debt**As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)Date debt was incurred **12/29/2006**

Last 4 digits of account number

7 5 6 8Add the dollar value of your entries in Column A on this page. Write
that number here:**\$131,976.92**If this is the last page of your form, add the dollar value totals from
all pages. Write that number here:**\$520,281.82**

Debtor 1 **Jodi L. Auker** Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div style="border: 1px solid black; display: inline-block; padding: 2px 5px;">1</div>	Buckley Madole, P.C.	On which line in Part 1 did you enter the creditor? <u>2.2</u>
	<small>Name</small> c/o Andrew Kussmaul	Last 4 digits of account number _____
	<small>Number Street</small> PO Box 9013	
	<hr/>	
	Addison TX 75001	
	<small>City State ZIP Code</small>	
<div style="border: 1px solid black; display: inline-block; padding: 2px 5px;">2</div>	KML Law Group, PC	On which line in Part 1 did you enter the creditor? <u>2.1</u>
	<small>Name</small> c/o Brooke R. Waisbord	Last 4 digits of account number _____
	<small>Number Street</small> Suite 5000, 701 Market Street	
	<hr/>	
	Philadelphia PA 19106	
	<small>City State ZIP Code</small>	

Fill in this information to identify your case:

Debtor 1	<u>Jodi</u>	<u>L.</u>	<u>Auker</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>MIDDLE DIST. OF PENNSYLVANIA</u>			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	\$3,653.87	\$3,653.87	\$0.00

Internal Revenue Service

Priority Creditor's Name

Insolvency Section - BK notice

Number Street

PO Box 7346

Last 4 digits of account number

When was the debt incurred? 2012-2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Philadelphia PA 19101-7346

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Part 1: Your PRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
\$6,611.10	\$6,611.10	\$0.00

2.2**PA Department of Revenue**

Priority Creditor's Name

Bankruptcy Section

Number Street

PO Box 280946**Harrisburg****PA****17128**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

2.3**Unknown Unknown Unknown****Pennsylvania Dept. of L & I**

Priority Creditor's Name

UC Tax Matters

Number Street

Office of Chief Counsel, 10th Fl**651 Boas Street****Harrisburg****PA****17121**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1

303 Benner Pike Holdings Ltd Partners

Nonpriority Creditor's Name

c/o Dana S. Plon, Esq.

Number Street

Sirlin Lesser & Benson, PC**123 South Broad Street, Suite 2100****Philadelphia****PA****19109**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

Business debt**\$121,109.61**

4.2

611 MRI CT

Nonpriority Creditor's Name

2950 Fairway Drive, Suite 1

Number Street

Altoona**PA****16602**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

Medical services**\$502.00**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.3****\$493.29****Advanced Disposal**

Nonpriority Creditor's Name

Solid Waste of PA

Number Street

PO Box 74008047**Chicago**

City

IL

State

60674

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt****4.4****\$742.00****Ahmed Mohamet**

Nonpriority Creditor's Name

426 Kemmerer Road

Number Street

State College

City

PA

State

16801

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt****4.5****\$185.00****Anne Norling**

Nonpriority Creditor's Name

100 Hawknest Way, Apt. 15

Number Street

Bellefonte

City

PA

State

16823

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.6****\$18,982.15****Ashley Furniture**

Nonpriority Creditor's Name

1 Ashley Way

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Arcadia**WI****54612**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.7**\$24,879.05****Bank of America**

Nonpriority Creditor's Name

275 S Valencia Avenue, CA7-70

Number Street

Last 4 digits of account number **5 8 8 0**When was the debt incurred? **2009**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Brea**CA****92823**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.8**\$9.50****Breg, Inc.**

Nonpriority Creditor's Name

PO Box 844628

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Dallas**TX****75284**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim4.9\$275.00**Bureau of Account Management**

Nonpriority Creditor's Name

3607 Rosemont Avenue, Suite 502

Number Street

P.O. Box 8875**Camp Hill****PA****17001-8875**

City

State

ZIP Code

Who incurred the debt?

Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number x x x xWhen was the debt incurred? 12/28/15

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Collection Agent for Milton S. Hershey Medical Cen**4.10\$161.00**Bureau of Account Management**

Nonpriority Creditor's Name

3607 Rosemont Avenue, Suite 502

Number Street

P.O. Box 8875**Camp Hill****PA****17001-8875**

City

State

ZIP Code

Who incurred the debt?

Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ YesLast 4 digits of account number x x x xWhen was the debt incurred? 2/16/16

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Collection Agent for Milton S. Hershey Medical Cen**4.11\$419.00**Capital One**

Nonpriority Creditor's Name

PO Box 85015

Number Street

Last 4 digits of account number x x x xWhen was the debt incurred? 2017

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Credit Card****Richmond****VA****23285-5075**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$127.19****Cari Gustafson**Nonpriority Creditor's Name
105 Doubletree Place
Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College PA 16803

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.13**\$930.48****Carol Morrell**Nonpriority Creditor's Name
210 Beacon Circle
Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Boalsburg PA 16827

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.14**\$300.00****Carol Welch**Nonpriority Creditor's Name
2171 W. Union Street
Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Canton PA 17724

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.15****\$85.00****Centre Diagnostic Imaging**

Nonpriority Creditor's Name

PO Box 197

Number Street

State College**PA****16804**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services**4.16****\$317.98****Chad Byerlee**

Nonpriority Creditor's Name

245 Governors Park Road

Number Street

Bellefonte**PA****16823**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.17****\$100.00****Christine Kondash**

Nonpriority Creditor's Name

1436 Majestic View Road

Number Street

State College**PA****16801**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.18****\$286.19****Christopher Uhlig**

Nonpriority Creditor's Name

1730 Bristol Avenue

Number Street

State College**PA****16801**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _ _ _ _**When was the debt incurred?** **2014****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

4.19**\$575.22****Columbia Gas of PA**

Nonpriority Creditor's Name

PO Box 117

Number Street

Columbus**OH****43216**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _ _ _ _**When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Utilities

4.20**\$1,441.57****Dawn Moss**

Nonpriority Creditor's Name

131 Quartz Drive

Number Street

Bellefonte**PA****16823**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _ _ _ _**When was the debt incurred?** **2015****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.21****\$8,691.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Wilmington

City

DE

State

19801

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **8/19/15**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.22**\$4,852.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Wilmington

City

DE

State

19801

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.23**\$5,145.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Wilmington

City

DE

State

19801

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.24****\$685.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.25**\$3,198.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.26**\$3,384.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.27****\$3,819.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? **9/18/17**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.28**\$2,419.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? **9/27/17**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.29**\$3,052.00****Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Last 4 digits of account number _____

When was the debt incurred? **11/9/18**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wilmington**DE****19801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim4.30\$4,503.00**Dept of Ed/Navient**

Nonpriority Creditor's Name

123 Justison Street, 3rd Floor

Number Street

Wilmington

City

DE

State

19801

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? 2/25/19

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

4.31Unknown**Donald M. Hahn, Esq.**

Nonpriority Creditor's Name

Stover McGlaughlin Gerace

Number Street

919 University Drive**State College**

City

PA

State

16801

ZIP Code

Who incurred the debt?

Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Attorney Fees4.32\$3,466.17**Donna Smouse**

Nonpriority Creditor's Name

100 Hawknest Way, Apt. 723

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2015

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Bellefonte**

City

PA

State

16823

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.33****\$28.75****EBI - Patient Pays**

Nonpriority Creditor's Name

PO Box 8500

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Philadelphia**PA****19178**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services**4.34****\$2,287.00****Erie Insurance**

Nonpriority Creditor's Name

100 Erie Insurance Place

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Erie**PA****16530**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.35****\$6,952.51****First Data**

Nonpriority Creditor's Name

5251 Westheimer Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Houston**TX****77056**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.36****\$9,952.38****FNB as successor to Omega Bank**

Nonpriority Creditor's Name

4140 East State Street

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2001**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Hermitage**PA 16148**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Line of Credit**4.37****\$208.00****FNB Omaha**

Nonpriority Creditor's Name

PO Box 3412

Number Street

Last 4 digits of account number _____

When was the debt incurred? **10/1/17**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Omaha**NE 68197**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Charge Account**4.38****\$360.00****Gail Lindsey**

Nonpriority Creditor's Name

403 Helca Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Mingoville**PA 16856**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.39****\$2,374.39****James Renninger**

Nonpriority Creditor's Name

650 E. Guardlock Drive

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Lock Haven**PA 17745**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.40**\$170.00****Janet Kirally**

Nonpriority Creditor's Name

234 Limerock Terrace, Apt. 207

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College**PA 16801**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.41**\$4,600.00****Jennifer Wiker**

Nonpriority Creditor's Name

661 Smith Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Port Matilda**PA 16870**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Business debt**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.42****\$828.78****Jeremy Dreibelbis**

Nonpriority Creditor's Name

120 Covalt Lane

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Spring Mills****PA 16875**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.43**\$720.78****Jo Ping Hsu**

Nonpriority Creditor's Name

722 Linnet Lane

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**State College****PA 16803**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.44**\$525.42****Joel Confer Ford**

Nonpriority Creditor's Name

2892 Benner Pike

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Repairs**Bellefonte****PA 16823**

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.45****\$185.00****Joshua Kirby**

Nonpriority Creditor's Name

112 Ridge Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College**PA****16803**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.46**\$856.77****Julie Evey**

Nonpriority Creditor's Name

4908 Nittany Valley Drive

Number Street

PO Box 54

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Lamar****PA****16848**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.47**\$1,200.00****Karen Adams**

Nonpriority Creditor's Name

404 Hawk Lane

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Julian****PA****16844**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.48****\$1,017.57****Kay Shuey**

Nonpriority Creditor's Name

174 Rosewood Cove

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Bellefonte****PA****16823**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.49**\$710.19****Kerry Uhler**

Nonpriority Creditor's Name

149 Robinson Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Howard****PA****16841**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.50**\$75.00****Lakara Smith**

Nonpriority Creditor's Name

119.5 E. Main

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**Lock Haven****PA****17745**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.51****\$960.00****Law Offices of Miller, Kistler & Campbell**

Nonpriority Creditor's Name

720 S. Atherton Street

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College PA 16801

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Legal services

4.52**\$300.00****Leo Hartman**

Nonpriority Creditor's Name

209 Wiltshire Drive

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Bellefonte PA 16823

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

4.53**\$975.17****Leslie Ramish**

Nonpriority Creditor's Name

201 Tavern Terrace

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Bellefonte PA 16823

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Business debt

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.54****\$148.14****Lighthouse Medical**

Nonpriority Creditor's Name

300 E. Walnut Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services**Altoona****PA****16601**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.55**\$175,201.68****M&T Trust Company**

Nonpriority Creditor's Name

1330 11th Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2005**

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Guaranty - Confessed Judgment**Altoona****PA****16601**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

09-1920 Centre County

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.56****\$106.00****Margaret Kaleita**

Nonpriority Creditor's Name

201 Outer Drive

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

State College**PA****16801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.57****\$11,000.00****Matthew Klinger**

Nonpriority Creditor's Name

PO Box 12034

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2012**

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

State College**PA****16801**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt - Judgment**13-2503 Centre County**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.58****\$32,000.00****Metro Commercial Mgmt Services**

Nonpriority Creditor's Name

303 Fellowship Road, Ste. 202

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Mount Laurel NJ 08054

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.59**\$420.00****Mike Naputano**

Nonpriority Creditor's Name

250 Hawknest Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College PA 16801

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.60**\$1,055.00****Millennium Health & Labs**

Nonpriority Creditor's Name

PO Box 844468

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Dallas TX 75284

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.61****\$4,900.00****Mount Nittany Medical Center**

Nonpriority Creditor's Name

1800 East Park Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2012-2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

State College**PA****16803**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Medical services**4.62****\$1,519.76****NE Kids**

Nonpriority Creditor's Name

PO Box 2459

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Christiansburg**VA****24068**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.63****\$520.00****Nexstar Broadcasting, Inc.**

Nonpriority Creditor's Name

c/o Gogi Malik

Number Street

545 E. John Carpenter Freeway**Suite 700**

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Irving**TX****75062**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.64****\$1,001.00****Nicole Watson**

Nonpriority Creditor's Name

160 Lorinda Lane

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Bellefonte**PA****16823**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.65**\$3,413.18****Paul Beauchemin**

Nonpriority Creditor's Name

1926 Waddle Road, Apt. 1

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

State College**PA****16803**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.66**\$590.00****Peak Media of Pennsylvania, LLC**

Nonpriority Creditor's Name

1450 Scalp Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Johnstown**PA****15904**

City

State

ZIP Code

Who incurred the debt?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.67****\$74,047.30****PR Financing**

Nonpriority Creditor's Name

200 S. Broad Street

Number Street

Philadelphia

City

PA

State

19102

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes**4.68****\$100.00****Richard Dillen**

Nonpriority Creditor's Name

143 Whitman Circle

Number Street

Pleasant Gap

City

PA

State

16823

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes**4.69****\$335.00****Rodney Facer**

Nonpriority Creditor's Name

209 Terra Sylvan Lane

Number Street

Bellefonte

City

PA

State

16823

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☒ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

4.70**Samantha Benson**

Nonpriority Creditor's Name

2170 W. Union Street

Number Street

Canton**PA****17724**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes4.71**Shuping Jing**

Nonpriority Creditor's Name

400 Hawknest Road

Number Street

State College**PA****16801**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes4.72**Stephanie & Robert Neff**

Nonpriority Creditor's Name

368 Lower Creek Road

Number Street

Milroy**PA****17063**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? 2015

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt****Total claim**\$750.00

Last 4 digits of account number _____

When was the debt incurred? 2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**\$1,336.21

Last 4 digits of account number _____

When was the debt incurred? 2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt**\$400.00

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.73****\$250.00****Steve Lutz**

Nonpriority Creditor's Name

1434 Willowbrook Drive

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Boalsburg PA 16827

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.74**\$1,593.16****Steven Perryman**

Nonpriority Creditor's Name

210 Upper Coleville Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Bellefonte PA 16823

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

4.75**\$333.00****SYNCB/QVC**

Nonpriority Creditor's Name

PO Box 965005

Number Street

Last 4 digits of account number **x x x x**When was the debt incurred? **12/19/18**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Orlando FL 32896

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Charge Account

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.76****\$1,860.18****The Standard Mattress Co.**

Nonpriority Creditor's Name

d/b/a Gold Bond

Number Street

261 Weston Street**Hartford****CT****06141-0089**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt****4.77****\$65.00****Trish Notautomas**

Nonpriority Creditor's Name

646 H Oakwood Avenue

Number Street

State College**PA****16803**

City

State

ZIP Code

Who incurred the debt?

Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Business debt****4.78****\$2,034.54****University Orthopedic**

Nonpriority Creditor's Name

c/o Berks Credit & Collection

Number Street

PO Box 329**Temple****PA****19560**

City

State

ZIP Code

Who incurred the debt?

Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt**Is the claim subject to offset?**☒ No☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Medical services**

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.79****\$695.07****Verizon Bankruptcy Admin**

Nonpriority Creditor's Name

500 Technology Drive

Number Street

Suite 550

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Weldon**MO****63304**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Phone services**4.80****\$2,412.35****Waste Management**

Nonpriority Creditor's Name

24516 Network Pl.

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2013**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Chicago**IL****60673**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.81****\$559.75****West Penn Power**

Nonpriority Creditor's Name

1310 Fairmont Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Fairmont**WV****26554**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Utilities

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.82****Unknown****William Shuey**

Nonpriority Creditor's Name

122 Ramblewood Road

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Penn. Furnace**PA****16865**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.83****\$260.00****WTAJ**

Nonpriority Creditor's Name

201 Humboldt St.

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Rochester**NY****14610**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt**4.84****\$270.00****WWCP/WATM/ThisTV**

Nonpriority Creditor's Name

1450 Scalp Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Johnstown**PA****15904**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.85

\$500.00

Yu Tai Chung

Nonpriority Creditor's Name

501 Westview Avenue

Number Street

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

State College PA 16803

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify

Business debt

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Arcadia Recovery Bureau, LLC

Name

PO Box 6768

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check one):

Part 1: Creditors with Priority Unsecured Claims



Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

_ _ _ _

Wyomissing

City

PA

State

19610

ZIP Code

Credit Management Company

Name

2121 Noblestown Road

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.61 of (Check one):

Part 1: Creditors with Priority Unsecured Claims



Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

_ _ _ _

Pittsburgh

City

PA

State

15205

ZIP Code

Dept of Ed/Navient

Name

PO Box 9635

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one):

Part 1: Creditors with Priority Unsecured Claims



Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

_ _ _ _

Wilkes-Barre

City

PA

State

18773

ZIP Code

Elizabeth Dupuis, Esq.

Name

Babst, Calland, Clements & Zomnir

Number Street

330 Innovation Blvd, Suite 302

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.36 of (Check one):

Part 1: Creditors with Priority Unsecured Claims



Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

_ _ _ _

State College

City

PA

State

16803

ZIP Code

Frederic Weinberg, Esq.

Name

1101 E. Hector Street, Ste 220

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one):

Part 1: Creditors with Priority Unsecured Claims



Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

_ _ _ _

Conshohocken

City

PA

State

19428

ZIP Code

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**Lloyd R. Persun, Esq.**

Name

Persun & Hamlin, PC

Number Street

PO Box 659

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.55 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Mechanicsburg

City

PA

State

17055

ZIP Code

Mazza Law Group

Name

c/o Joseph Korsak, Esq.

Number Street

3081 Enterprise Drive, Suite 2

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.57 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

State College

City

PA

State

16801

ZIP Code

Mount Nittany Medical Center

Name

PO Box 536317

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.61 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Pittsburgh

City

PA

State

15253

ZIP Code

National Recovery Agency, Inc.

Name

P.O. Box 67015

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Harrisburg

City

PA

State

17106-7015

ZIP Code

RMS

Name

PO Box 3100

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.34 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Naperville

City

IL

State

60563

ZIP Code

Sirlin, Lesser & Benson

Name

123 S. Broad Street, Ste. 2100

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.58 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Philadelphia

City

PA

State

19109

ZIP Code

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$10,264.97</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$10,264.97</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$39,748.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$530,351.43</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$570,099.43</u>

Fill in this information to identify your case:

Debtor 1	<u>Jodi</u>	<u>L.</u>	<u>Auker</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>MIDDLE DIST. OF PENNSYLVANIA</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease**State what the contract or lease is for**

Fill in this information to identify your case:

Debtor 1	Jodi	L.	Auker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

- Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
☐ No
☒ Yes
- Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☐ Yes
- In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 **Nittany Sleep/Furniture Solutions**
 Name
c/o Jodi Auker
 Number Street
145 Summit Drive
Centre hall **PA** **16828**
 City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.57**
☐ Schedule G, line _____
Matthew Klinger

3.2 **Nittany Sleep/Furniture Solutions**
 Name
c/o Jodi Auker
 Number Street
145 Summit Drive
Centre hall **PA** **16828**
 City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **2.1**
☐ Schedule G, line _____
Internal Revenue Service

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.3 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **2.2**
☐ Schedule G, line _____
PA Department of Revenue

3.4 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **2.3**
☐ Schedule G, line _____
Pennsylvania Dept. of L & I

3.5 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.1**
☐ Schedule G, line _____
303 Benner Pike Holdings Ltd Partners

3.6 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.3**
☐ Schedule G, line _____
Advanced Disposal

3.7 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.4**
☐ Schedule G, line _____
Ahmed Mohamet

3.8 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.5**
☐ Schedule G, line _____
Anne Norling

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.9 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.6**
☐ Schedule G, line _____
Ashley Furniture

3.10 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.12**
☐ Schedule G, line _____
Cari Gustafson

3.11 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.13**
☐ Schedule G, line _____
Carol Morrell

3.12 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.14**
☐ Schedule G, line _____
Carol Welch

3.13 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.16**
☐ Schedule G, line _____
Chad Byerlee

3.14 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive
Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.17**
☐ Schedule G, line _____
Christine Kondash

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.15 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.18**
☐ Schedule G, line _____
Christopher Uhlig

3.16 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.20**
☐ Schedule G, line _____
Dawn Moss

3.17 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.32**
☐ Schedule G, line _____
Donna Smouse

3.18 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.34**
☐ Schedule G, line _____
Erie Insurance

3.19 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.35**
☐ Schedule G, line _____
First Data

3.20 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.38**
☐ Schedule G, line _____
Gail Lindsey

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.21 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.39**
☐ Schedule G, line _____
James Renninger

3.22 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.40**
☐ Schedule G, line _____
Janet Kirally

3.23 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.41**
☐ Schedule G, line _____
Jennifer Wiker

3.24 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.42**
☐ Schedule G, line _____
Jeremy Dreibelbis

3.25 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.43**
☐ Schedule G, line _____
Jo Ping Hsu

3.26 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.45**
☐ Schedule G, line _____
Joshua Kirby

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.27 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.46**

☐ Schedule G, line _____

Julie Evey

3.28 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.47**

☐ Schedule G, line _____

Karen Adams

3.29 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.48**

☐ Schedule G, line _____

Kay Shuey

3.30 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.49**

☐ Schedule G, line _____

Kerry Uhler

3.31 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.50**

☐ Schedule G, line _____

Lakara Smith

3.32 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.51**

☐ Schedule G, line _____

Law Offices of Miller, Kistler & Campbel

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.33 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.52**

☐ Schedule G, line _____

Leo Hartman

3.34 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.53**

☐ Schedule G, line _____

Leslie Ramish

3.35 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.56**

☐ Schedule G, line _____

Margaret Kaleita

3.36 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.58**

☐ Schedule G, line _____

Metro Commercial Mgmt Services

3.37 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.59**

☐ Schedule G, line _____

Mike Naputano

3.38 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.62**

☐ Schedule G, line _____

NE Kids

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.39 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.63**

☐ Schedule G, line _____

Nexstar Broadcasting, Inc.

3.40 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.64**

☐ Schedule G, line _____

Nicole Watson

3.41 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.65**

☐ Schedule G, line _____

Paul Beauchemin

3.42 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.66**

☐ Schedule G, line _____

Peak Media of Pennsylvania, LLC

3.43 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.67**

☐ Schedule G, line _____

PR Financing

3.44 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.68**

☐ Schedule G, line _____

Richard Dillen

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.45 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.69**

☐ Schedule G, line _____

Rodney Facer

3.46 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.70**

☐ Schedule G, line _____

Samantha Benson

3.47 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.71**

☐ Schedule G, line _____

Shuping Jing

3.48 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.72**

☐ Schedule G, line _____

Stephanie & Robert Neff

3.49 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.73**

☐ Schedule G, line _____

Steve Lutz

3.50 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.74**

☐ Schedule G, line _____

Steven Perryman

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.51 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.76**

☐ Schedule G, line _____

The Standard Mattress Co.

3.52 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.77**

☐ Schedule G, line _____

Trish Notautomas

3.53 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.79**

☐ Schedule G, line _____

Verizon Bankruptcy Admin

3.54 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.80**

☐ Schedule G, line _____

Waste Management

3.55 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.81**

☐ Schedule G, line _____

West Penn Power

3.56 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____

☒ Schedule E/F, line **4.82**

☐ Schedule G, line _____

William Shuey

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.57 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.83**
☐ Schedule G, line _____
WTAJ

3.58 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.84**
☐ Schedule G, line _____
WWCP/WATM/ThisTV

3.59 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.85**
☐ Schedule G, line _____
Yu Tai Chung

3.60 Nittany Sleep/Furniture Solutions

Name
c/o Jodi Auker
Number Street
145 Summit Drive

Centre hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.19**
☐ Schedule G, line _____
Columbia Gas of PA

3.61 Wayne Auker

Name
145 Summit Dr.
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.37**
☐ Schedule G, line _____
FNB Omaha

3.62 Auker, Wayne

Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **1**
☐ Schedule G, line _____
Buckley Madole, P.C.

Debtor 1 **Jodi L. Auker**

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.63 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.11**
☐ Schedule G, line _____
Capital One

3.64 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **5.4**
☐ Schedule G, line _____
Elizabeth Dupuis, Esq.

3.65 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.36**
☐ Schedule G, line _____
FNB as successor to Omega Bank

3.66 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **4.37**
☐ Schedule G, line _____
FNB Omaha

3.67 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **5.5**
☐ Schedule G, line _____
Frederic Weinberg, Esq.

3.68 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line **2**
☐ Schedule G, line _____
KML Law Group, PC

Debtor 1 Jodi L. Auker

Case number (if known) _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.69 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line 5.6
☐ Schedule G, line _____
Lloyd R. Persun, Esq.

3.70 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line 4.55
☐ Schedule G, line _____
M&T Trust Company

3.71 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line 4.57
☐ Schedule G, line _____
Matthew Klinger

3.72 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☐ Schedule D, line _____
☒ Schedule E/F, line 5.7
☐ Schedule G, line _____
Mazza Law Group

3.73 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☒ Schedule D, line 2.1
☐ Schedule E/F, line _____
☐ Schedule G, line _____
Shellpoint Mortgage Servicing

3.74 **Auker, Wayne**
Name
145 Summit Drive
Number Street

Centre Hall **PA** **16828**
City State ZIP Code

☒ Schedule D, line 2.2
☐ Schedule E/F, line _____
☐ Schedule G, line _____
Specialized Loan Servicing LLC

Fill in this information to identify your case:

Debtor 1	<u>Jodi</u>	<u>L.</u>	<u>Auker</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>MIDDLE DIST. OF PENNSYLVANIA</u>		
Case number (if known)	_____		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

☒ Employed
☐ Not employed

Loan Officer

Finance of America

State College, PA
Number Street

City State Zip Code

Debtor 2 or non-filing spouse

☒ Employed
☐ Not employed

Supervisor - Back End Dept.

Lowes Home Centers, LLC

State College, PA
Number Street

City State Zip Code

How long employed there? 2 mos.

5 yrs.

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	<u>\$2,000.00</u>	<u>\$4,691.84</u>
3. Estimate and list monthly overtime pay.	<u>\$0.00</u>	<u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	<u>\$2,000.00</u>	<u>\$4,691.84</u>

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$2,000.00	\$4,691.84
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$320.00	\$736.02
5b. Mandatory contributions for retirement plans	5b. \$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c. \$0.00	\$328.43
5d. Required repayments of retirement fund loans	5d. \$0.00	\$0.00
5e. Insurance	5e. \$0.00	\$553.22
5f. Domestic support obligations	5f. \$0.00	\$0.00
5g. Union dues	5g. \$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. + \$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$320.00	\$1,617.67
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$1,680.00	\$3,074.17
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$0.00	\$0.00
8b. Interest and dividends	8b. \$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$0.00	\$0.00
8d. Unemployment compensation	8d. \$0.00	\$0.00
8e. Social Security	8e. \$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$0.00	\$0.00
8g. Pension or retirement income	8g. \$0.00	\$0.00
8h. Other monthly income. Specify: 2018 tax refund	8h. + \$384.25	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$384.25	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$2,064.25	\$3,074.17
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + \$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. \$5,138.42	\$5,138.42
13. Do you expect an increase or decrease within the year after you file this form? <input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes. Explain: See continuation sheet.		Combined monthly income

Debtor 1 Jodi L. Aufer

Case number (if known) _____

13. Expected increase or decrease within the year after you file this form:

Debtor began new job at the end of November 2019 which is commission based reliant upon the amount of loans closed per month. She just finished the training course. It is anticipated that she will close at least one loan per month for approximately \$2000 in fees, with tax reduction by 16% based upon prior pay rate history.

Fill in this information to identify your case:

Debtor 1 **Jodi** **L.** **Auker**
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **MIDDLE DIST. OF PENNSYLVANIA**

Case number
 (if known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

<input checked="" type="checkbox"/> No	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
<input type="checkbox"/> Yes. Fill out this information for each dependent.....			<input type="checkbox"/> No
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No
			<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence.
 Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4. **\$2,398.94**

4a. _____

4b. _____

4c. **\$200.00**

4d. _____

Debtor 1 Jodi L. Auker

Case number (if known) _____

Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	_____
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	<u>\$290.00</u>
6b. Water, sewer, garbage collection	6b.	<u>\$31.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$207.00</u>
6d. Other. Specify: <u>Cell phones</u>	6d.	<u>\$198.00</u>
7. Food and housekeeping supplies	7.	<u>\$600.00</u>
8. Childcare and children's education costs	8.	_____
9. Clothing, laundry, and dry cleaning	9.	<u>\$50.00</u>
10. Personal care products and services	10.	<u>\$45.00</u>
11. Medical and dental expenses	11.	<u>\$63.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<u>\$423.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	<u>\$200.00</u>
14. Charitable contributions and religious donations	14.	_____
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	_____
15b. Health insurance	15b.	_____
15c. Vehicle insurance	15c.	<u>\$165.00</u>
15d. Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	_____
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	_____
17b. Car payments for Vehicle 2	17b.	_____
17c. Other. Specify: _____	17c.	_____
17d. Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	_____
19. Other payments you make to support others who do not live with you. Specify: _____	19.	_____

Debtor 1 Jodi L. Auker

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: Pet/vet expense 21. + \$70.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a. <u>\$4,940.94</u>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. <u>\$4,940.94</u>

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. <u>\$5,138.42</u>
23b. Copy your monthly expenses from line 22c above.	23b. - <u>\$4,940.94</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. <u>\$197.48</u>

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here:

None.

Fill in this information to identify your case:

Debtor 1 **Jodi** **L.** **Auker**
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **MIDDLE DIST. OF PENNSYLVANIA**

Case number
 (if known) _____

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
 Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B..... **\$382,500.00**

1b. Copy line 62, Total personal property, from Schedule A/B..... **\$15,322.74**

1c. Copy line 63, Total of all property on Schedule A/B..... **\$397,822.74**

Part 2: Summarize Your Liabilities

Your liabilities
 Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$520,281.82**

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$10,264.97**

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$570,099.43**

Your total liabilities

\$1,100,646.22

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I..... **\$5,138.42**

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J..... **\$4,940.94**

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.**\$4,691.84****9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:****Total claim**From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$10,264.97</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$39,748.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u>\$0.00</u>
9g. Total. Add lines 9a through 9f.	\$50,012.97

Fill in this information to identify your case:

Debtor 1 **Jodi** **L.** **Auker**
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **MIDDLE DIST. OF PENNSYLVANIA**

Case number
(if known) _____

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

Jodi L. Auker, Debtor 1

Date 03/05/2020
MM / DD / YYYY

X

Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Jodi	L.	Auker
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DIST. OF PENNSYLVANIA			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

- What is your current marital status?
 - ☒ Married
 - ☐ Not married
- During the last 3 years, have you lived anywhere other than where you live now?
 - ☒ No
 - ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.
- Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 - ☒ No
 - ☐ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

- Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.
 - ☐ No
 - ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the last calendar year: (January 1 to December 31, <u>2019</u>)	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2018</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

Debtor 1 **Jodi L. Aufer** Case number (if known) _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
For the last calendar year: (January 1 to December 31, <u>2019</u>) YYYY	Unemployment Comp	\$9,435.00	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
For the calendar year before that: (January 1 to December 31, <u>2018</u>) YYYY	Unemployment Comp	\$4,995.00	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.

- ☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Capital One		\$2,157.33	\$419.00	<input type="checkbox"/> Mortgage
Creditor's name				<input type="checkbox"/> Car
PO Box 85015	Dec. 2019			<input type="checkbox"/> Credit card
Number Street	Jan. 2020			<input type="checkbox"/> Loan repayment
	Feb. 2020			<input type="checkbox"/> Suppliers or vendors
Richmond				<input checked="" type="checkbox"/> Other Husband's credit car
City				
VA				
State				
23285-5075				
ZIP Code				

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- ☒ No
☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- ☒ No
☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No
☒ Yes. Fill in the details.

Case title Klinger v. Furniture Solutions & Auker
Nature of the case Money judgment

Case number 13-2503

Court or agency Centre County Court Status of the case
Court Name ☐ Pending
☐ On appeal
Number Street ☒ Concluded

Bellefonte PA
City State ZIP Code

Case title Bank of New York Mellon v. Auker
Nature of the case Mortgage Foreclosure

Case number 19-3734

Court or agency Centre County Court Status of the case
Court Name ☒ Pending
☐ On appeal
Number Street ☐ Concluded

Bellefonte PA
City State ZIP Code

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
www.debtorcc.org Person Who Was Paid	\$14.95 for Credit Counseling	2/26/20	\$14.95
Number _____ Street _____			
City _____ State _____ ZIP Code _____			
Email or website address _____			
Person Who Made the Payment, if Not You _____			
Mette, Evans & Woodside Person Who Was Paid	\$500 plus \$310 filing fee	3/5/20	\$810.00
Number _____ Street _____			
City _____ State _____ ZIP Code _____			
Email or website address _____			
Person Who Made the Payment, if Not You _____			

17. **Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

18. **Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. **Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?** (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. **Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

21. **Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

- ☒ No
☐ Yes. Fill in the details.

22. **Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. **Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☐ No. None of the above applies. Go to Part 12.
☒ Yes. Check all that apply above and fill in the details below for each business.

Nittany Sleep, LLC

Business Name

Describe the nature of the business
Retail sale of bedsEmployer Identification number
Do not include Social Security number or ITIN.EIN: 2 0 - 3 1 8 7 0 5 7**Nittany Mall**

Number Street

Name of accountant or bookkeeper

Dates business existed

From 2005 To 2012**State College** **PA** **16801**

City State ZIP Code

Describe the nature of the business
Retail sale of furnitureEmployer Identification number
Do not include Social Security number or ITIN.EIN: 4 6 - 1 6 7 3 4 4 6**Benner Pike**

Number Street

Name of accountant or bookkeeper

Dates business existed

From 2013 To 2015**State College** **PA** **16801**

City State ZIP Code

Debtor 1 Jodi L. Auken

Case number (if known) _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☒ No
☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X 
Jodi L. Auken, Debtor 1

X _____
Signature of Debtor 2

Date 03/05/2020

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

IN THE UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF PENNSYLVANIA
WILLIAMSPORT DIVISION

In re:
Jodi L. Auken

:
: Case No.:
:
: Chapter: 13
:

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept:	See attached rider.
Prior to the filing of this statement I have received:	\$500.00.
Balance Due:	See attached rider.

2. The source of the compensation paid to me was:
☒ Debtor ☐ Other(Specify)
3. The source of compensation to be paid to me is:
☒ Debtor ☐ Other(Specify)
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; and
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof.

All other matters disclosed in the written fee agreement.

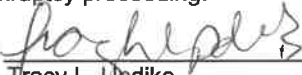
6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Those disclosed in the written fee agreement.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

3/6/2020
Date


Tracy L. Updike
Mette Evans and Woodside
3401 North Front Street
Harrisburg, PA 17110

Bar No. 88680

Phone: (717) 232-5000 / Fax: (717) 236-1816

Debtor has agreed to pay \$5,000.00 as the Presumptively Reasonable Fee to be initially requested to be paid to Mette, Evans and Woodside at confirmation of Debtor's Chapter 13 Plan. Debtor has paid \$500.00 towards that fee pre-petition to Mette, Evans and Woodside. However, Mette, Evans and Woodside has reserved the right to request fees beyond the Presumed Reasonable Fee at confirmation if the hourly billing exceeds that fee and services exceed the normal and customary services prior to confirmation. Debtor's fee agreement provides for all records to be kept hourly.

All services post-confirmation will be billed at Mette, Evans and Woodside hourly rates then in effect at the time of billing, which are now fixed at \$300.00 for the responsible attorney, and will be submitted to the Court in Applications for Compensation as needed.

Jodi L. Auker
4-20-

Initial Plan Filed: 3/6/20

Secured:

Bank of NY Mellon serviced by Shellpoint Mtg Servicing (#2853)
Residence at 145 Summit Drive, Centre Hall \$90,000 est.

Bank of NY Mellon serviced by Specialized Loan Servicing Strip
(#7568) recorded 01980-0313 on Jan. 17, 2007

Priority:

IRS – 2012-2014 \$3,654 est

PA Revenue – 2012-2015 \$6,611 est

PA Dept L&I \$0 est.

M&T Trust Company & Avoid judgments
Matthew Klinger

Attorney's Fees: \$ 4,500.00

TOTAL \$104,765.00

TRUSTEE COMMISSION (10%) \$ 10,476.50

TOTAL PAYMENTS \$115,241.50

$\$115,241.50 \div 60 = \$1,920.69$

$\$200 \times 12 = \$2,400$

$\$1,000 \times 12 = \$12,000$

$\$100,841.50 \div 36 = \$2,801.15$

$\$2,802 \times 36 = \$100,872 + \$14,400 = \$115,272$

SCHEDULE I & J DISPOSABLE INCOME: \$197.48
MEANS TEST DISPOSABLE INCOME: negative in 3